

Request For Continued Examination (RCE) Transmittal	Application Number	10/516,521
	Filing Date	2 May 2005
	First Named Inventor	DOLDERER, J.
	Group Art Unit	1612
	Examiner Name	Sutton, D
	Attorney Docket Number	23136

This is a Request for Continued Examination under 37 CFR 1.114 of the above-identified application.

<p>1. Submission required under 37 CFR 1.114</p>	<p>a. <input checked="" type="checkbox"/> Previously submitted</p> <ul style="list-style-type: none"> i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 CFR 1.116 filed <u>1 August 2008</u>. ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply brief filed _____. iii. <input type="checkbox"/> Other _____. <p>b. <input type="checkbox"/> Enclosed</p> <ul style="list-style-type: none"> i. <input type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement (IDS) iv. <input type="checkbox"/> Other _____.
<p>2. Miscellaneous</p>	<p>a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months.</p> <p>b. <input type="checkbox"/> Other _____.</p>
<p>3. Fees</p>	<p>a. <input type="checkbox"/> The Director is hereby authorized to charge the following fees or credit any overpayments to deposit account 18-2025.</p> <ul style="list-style-type: none"> i. <input type="checkbox"/> RCE fee required under 37 CFR 1.17(e). ii. <input type="checkbox"/> Extension of time fee under 37 CFR 1.136 or 1.17 iii. <input type="checkbox"/> Other _____. <p>b. <input type="checkbox"/> Check in the amount of \$_____.</p> <p>c. <input type="checkbox"/> Payment by credit card (PTO-2038 attached).</p> <p>d. <input checked="" type="checkbox"/> Payment through EFS.</p>

SIGNATURE OF ATTORNEY

Name	Jonathan Myers	Reg. No.	26,963
Signature	<i>/Jonathan Myers/</i>		
Date	3 September 2008		

CERTIFICATE OF MAILING

I hereby certify			
Name			
Signature		Date	